



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E288314**

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INTERSTATE	<input type="checkbox"/>	CITY STREET	<input type="checkbox"/>	FIRE RESULTED	<input type="checkbox"/>
STATE ROUTE	<input checked="" type="checkbox"/>	OTHER	<input type="checkbox"/>	STOLEN VEHICLE	<input type="checkbox"/>
COUNTY RD	<input type="checkbox"/>	PRIVATE WAY	<input type="checkbox"/>	HIT & RUN INVOLVED	<input type="checkbox"/>

TRIBAL RESERVATION	
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DATE OF COLLISION	11	-	26	-	2013	TIME (2400)	1845	COUNTY #	31	MILES		N	<input type="checkbox"/>	E	<input type="checkbox"/>	IN	<input checked="" type="checkbox"/>	OF	0664
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ON (PRIMARY TRAFFIC WAY)	INTERSECTION	<input type="checkbox"/>	NON-INTERSECTION	<input checked="" type="checkbox"/>
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SR 9 NE	BLOCK NO.	<input checked="" type="checkbox"/>	1800
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DISTANCE	833	00	MILES	<input type="checkbox"/>	N	<input type="checkbox"/>	E	<input type="checkbox"/>	OF (REFERENCE OR CROSS STREET)	LUNDEEN PARKWAY	<input checked="" type="checkbox"/>	S	<input checked="" type="checkbox"/>	W	<input type="checkbox"/>
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UNIT 01	MOTOR VEHICLE	<input checked="" type="checkbox"/>	PEDAL CYCLE	<input type="checkbox"/>	DAMAGE THRESHOLD MET	YES	<input checked="" type="checkbox"/>	NO	PHONE	D: 4255837778
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LAST NAME	WOLFF	FIRST NAME	JULES	MIDDLE INITIAL	R
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STREET NEW ADDRESS	7059 ROBE MENDEL RD
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CITY	GRANITE FALLS	ST	WA	ZIP	98252
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	W410-4363-4219-03	STATE	WI	SEX	M	D.O.B.	MMDDYYYY	06	-	19	-	1934
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ON DUTY	<input type="checkbox"/>	STATUS	AIRBAG	2	RESTR	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	ADE4931	STATE	WA	VIN#	KNDUP131X48561445
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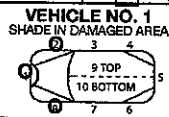
TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2004	MAKE	KIA	MODEL	SEDON	STYLE	VEHICLE TOWED	YES	<input checked="" type="checkbox"/>	NO	TOWED BY	MACK'S TOWING	GOVT. VEHICLE	YES	<input checked="" type="checkbox"/>	NO
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REGISTERED OWNER INFO.	JULES WOLFF 7059 ROBE MENDEL RD GRANITE FALLS WA 98252
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LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	MIDDLESEX INS COMPANY 474586892
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VEHICLE LEGALLY STANDING	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	CITATION #	CHARGE
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UNIT 02	MOTOR VEHICLE	<input checked="" type="checkbox"/>	PEDAL CYCLE	<input type="checkbox"/>	PEDESTRIAN	<input type="checkbox"/>	PROPERTY OWNER	<input type="checkbox"/>	DAMAGE THRESHOLD MET	YES	<input checked="" type="checkbox"/>	NO	PHONE	D: 4255306789
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LAST NAME	NOGLE	FIRST NAME	DEREK	MIDDLE INITIAL	D
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STREET NEW ADDRESS	19728 KNOLL DR
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CITY	ARLINGTON	ST	WA	ZIP	982234006
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	NOGLEDD187QS	STATE	WA	SEX	M	D.O.B.	MMDDYYYY	11	-	10	-	1984
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ON DUTY	<input type="checkbox"/>	STATUS	AIRBAG	2	RESTR	4	EJECT	1	HELMET USE	INJURY CLASS	1	NATURE OF INJURIES
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LICENSE PLATE #	ANF1231	STATE	WA	VIN#	2G2WP552671112740
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TRAILER PLATE #	STATE	TRAILER PLATE #	STATE
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VEH. YEAR	2007	MAKE	PONT	MODEL	GRAND	STYLE	2T	VEHICLE TOWED	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	TOWED BY	GOVT. VEHICLE	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	
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LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	GEICO 4007223052
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VEHICLE LEGALLY STANDING	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	CITATION #	CHARGE
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OFFICER'S NAME (PRINT)	KERRY BERNHARD	BADGE OR ID #	120	AGENCY	WA0311900
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3
1 1 8 28
2
3
0 1 29
0 6 30
1 1 2 31
2
3
1 1 2 32
2
3
FROM TO
5 1 33
FROM TO
5 1 34
4 35
4 36
37
38
39
40
41
42



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E288314**

CASE # **13-02995**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)											
NAME (LAST, FIRST, MIDDLE INITIAL)		HIMMELBERGER MIKAYLAH C									
ADDRESS & PHONE #		2802 68TH DR NE MARYSVILLE WA 982707551 2062579805									
PASSENGER <input checked="" type="checkbox"/> WITNESS <input type="checkbox"/>	UNIT #	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES			
<input checked="" type="checkbox"/>	3	3	2	4	1		1				
NAME (LAST, FIRST, MIDDLE INITIAL)		MACPHERSON CONNER L									
ADDRESS & PHONE #		2802 68TH DR NE MARYSVILLE WA 982707551 2062579805									
PASSENGER <input checked="" type="checkbox"/> WITNESS <input type="checkbox"/>	UNIT #	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES			
<input checked="" type="checkbox"/>	3	11	2	4	1		1				
NAME (LAST, FIRST, MIDDLE INITIAL)											
ADDRESS & PHONE #											
PASSENGER <input type="checkbox"/> WITNESS <input type="checkbox"/>	UNIT #	SEAT POS.	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES			
<input type="checkbox"/>											

NARRATIVE

On 11/26/2013 at approximately 1846, I responded to a report of a three vehicle collision on SR 9 NE south of the Lundeen Parkway intersection. When I arrived on scene all three vehicle's had moved to the designated right turn lane.

All three vehicle's had been travelling northbound in the inside travel lane approaching the traffic light at Lundeen parkway. Unit 3 was stopped for the red light. Unit 2 was slowing to a stop behind Unit 3. Unit 1 did not stop for the slowing/stopped traffic and collided with the back of Unit 2 pushing it into Unit 3.

No injuries were reported. Unit 3 was towed from the scene.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

KERRY BERNHARD

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

11-27-13 05:29 AM

DATED

PLACE SIGNED

APPROVED BY

RON BROOKS 013

DATE

11/27/2013 11:38:26 AM

BADGE OR ID # **120**

ORI #

WA0311900

TIME POLICE DISPATCHED

6:46 PM

TIME POLICE ARRIVED

6:54 PM

PART B 3000-345-160 R (7/06)

PAGE **2** OF **4**



SUPPLEMENTAL
POLICE TRAFFIC
COLLISION REPORT



013197

REPORT NO. **E288314**

CASE # **13-02995**

COMMERCIAL MOTOR CARRIER

INTERSTATE ☐

INTRASTATE ☐

UNIT #

USDOT

CG #

VEHICLE TYPE

CARGO BODY TYPE

CARRIER NAME

CARRIER ADDRESS

CITY

ST

ZIP

NAME SOURCE

AXLES

GYWR

PLACARD

NAME IF NO NUMBER

ADDITIONAL UNITS

UNIT # **3**

MOTOR VEHICLE ☒

PEDAL CYCLE ☐

PEDESTRIAN ☐

PROPERTY OWNER ☐

DAMAGE THRESHOLD MET YES ☒ NO ☐

PHONE

D: 2062579805

LAST NAME

HIMMELBERGER

FIRST NAME

STEPHANIE

MIDDLE INITIAL

A

STREET NEW ADDRESS

2802 68TH DR NE

CITY

MARYSVILLE

ST

WA

ZIP

982707551

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S LICENSE #

HIMMESA261RL

STATE

WA

SEX

F

D.O.B.

MMDDYYYY

12

13

1974

ON DUTY ☐

STATUS

AIRBAG

2

RESTR.

4

EJECT

1

HELMET USE

1

INJURY CLASS

1

NATURE OF INJURIES

LICENSE PLATE #

ABV6758

STATE

WA

VIN#

JTEBU4BF1AK094171

TRAILER PLATE #

STATE

WA

TRAILER PLATE #

STATE

WA

VEH. YEAR

2010

MAKE

TOYT

MODEL

FJ2D

STYLE

UT

VEHICLE TOWED YES ☐ NO ☒

TOWED BY

GOVT VEHICLE

YES ☐ NO ☒

REGISTERED OWNER INFO. **STEPHANIE HIMMELBERGER 2802 68TH DR NE MARYSVILLE WA 98270**

LIABILITY INSURANCE IN EFFECT ☒

INSURANCE CO & POLICY #

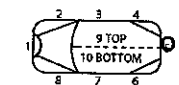
AMERICAN FAMILY 1906-9012-01-65-FPPA-WA

VEHICLE LEGALLY STANDING YES ☒ NO ☐

CITATION #

CHARGE

SHADE IN DAMAGED AREA



UNIT #

MOTOR VEHICLE ☐

PEDAL CYCLE ☐

PEDESTRIAN ☐

PROPERTY OWNER ☐

DAMAGE THRESHOLD MET YES ☐ NO ☐

PHONE

LAST NAME

FIRST NAME

MIDDLE INITIAL

STREET NEW ADDRESS

CITY

ST

ZIP

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S LICENSE #

STATE

SEX

F

D.O.B.

MMDDYYYY

12

13

1974

ON DUTY ☐

STATUS

AIRBAG

2

RESTR.

4

EJECT

1

HELMET USE

1

INJURY CLASS

1

NATURE OF INJURIES

LICENSE PLATE #

STATE

WA

VIN#

JTEBU4BF1AK094171

TRAILER PLATE #

STATE

WA

TRAILER PLATE #

STATE

WA

VEH. YEAR

2010

MAKE

TOYT

MODEL

FJ2D

STYLE

UT

VEHICLE TOWED YES ☐ NO ☒

TOWED BY

GOVT VEHICLE

YES ☐ NO ☒

REGISTERED OWNER INFO.

LIABILITY INSURANCE IN EFFECT ☐

INSURANCE CO & POLICY #

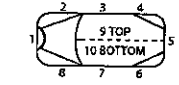
AMERICAN FAMILY 1906-9012-01-65-FPPA-WA

VEHICLE LEGALLY STANDING YES ☐ NO ☐

CITATION #

CHARGE

SHADE IN DAMAGED AREA



I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

KERRY BERNHARD

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST DET

11-27-13 05:29 AM

DATED:

PLACE SIGNED

BADGE OR ID #

120

ORI #

WA0311900

APPROVED BY

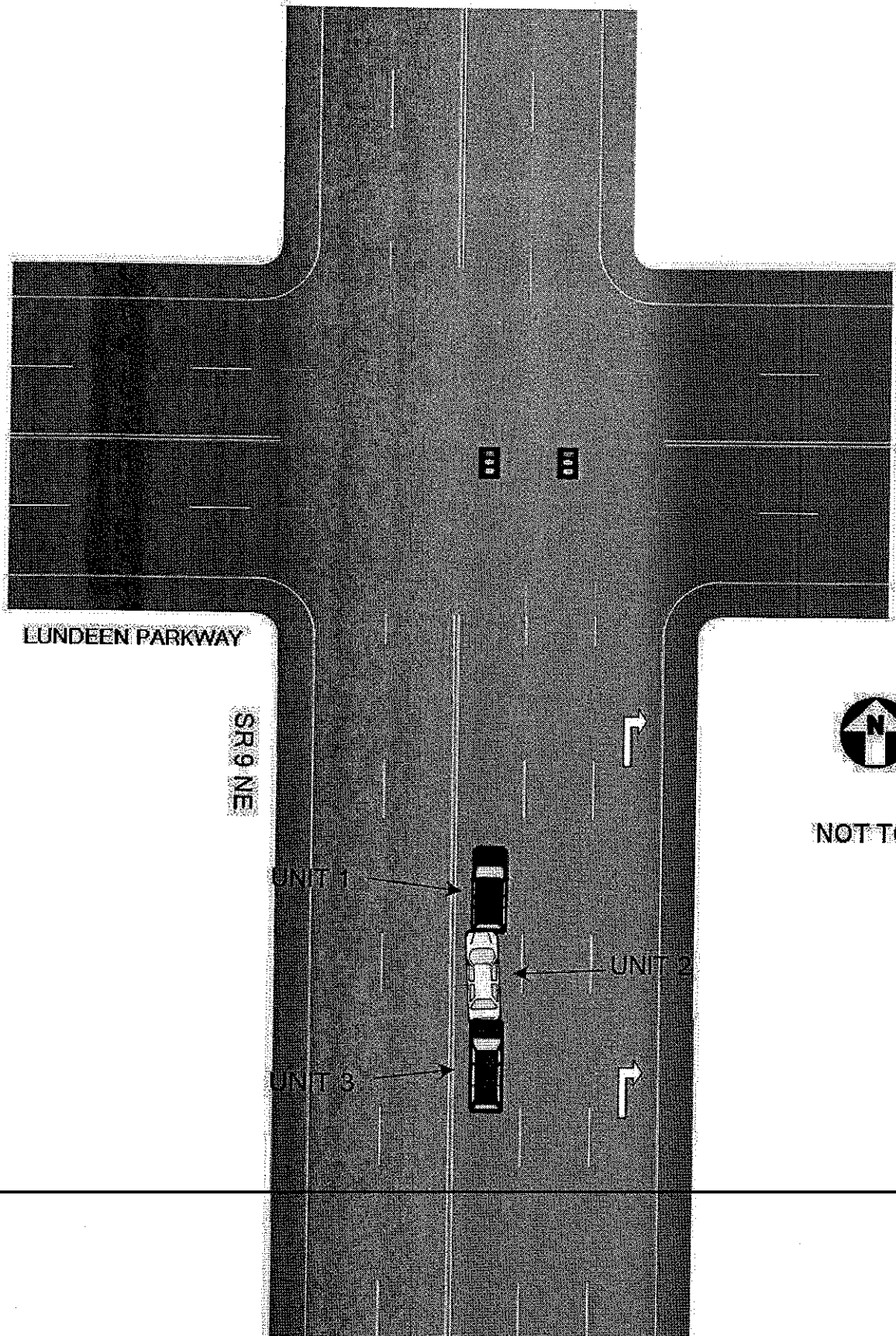
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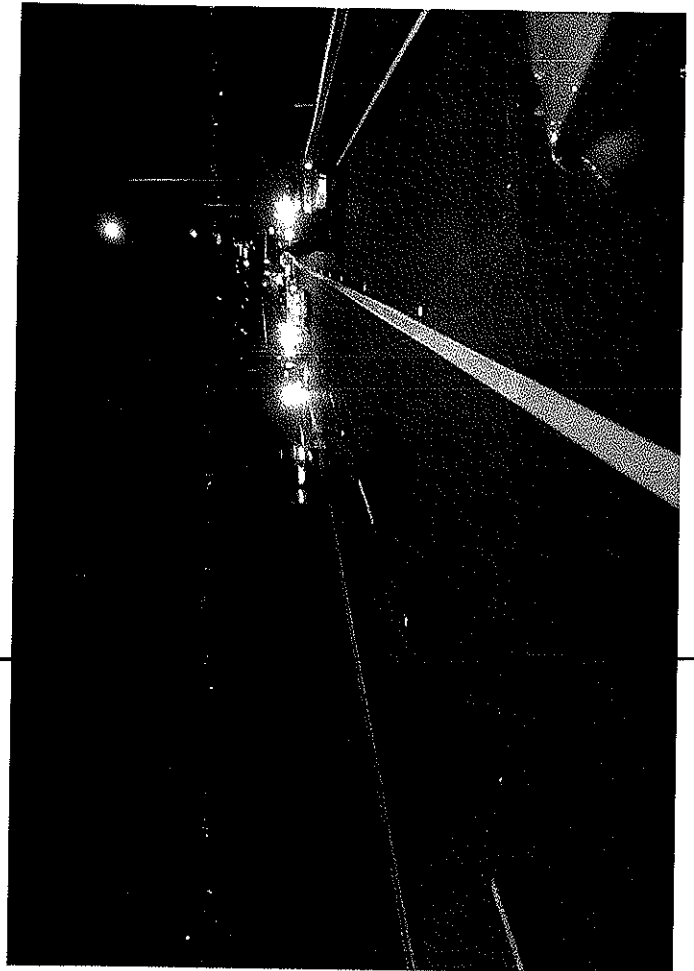
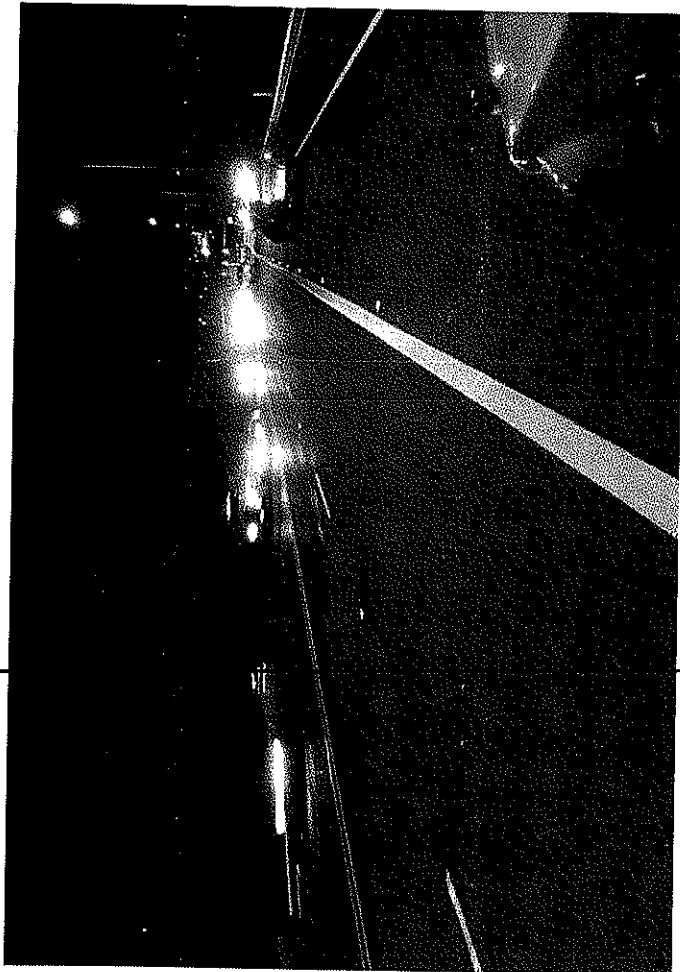
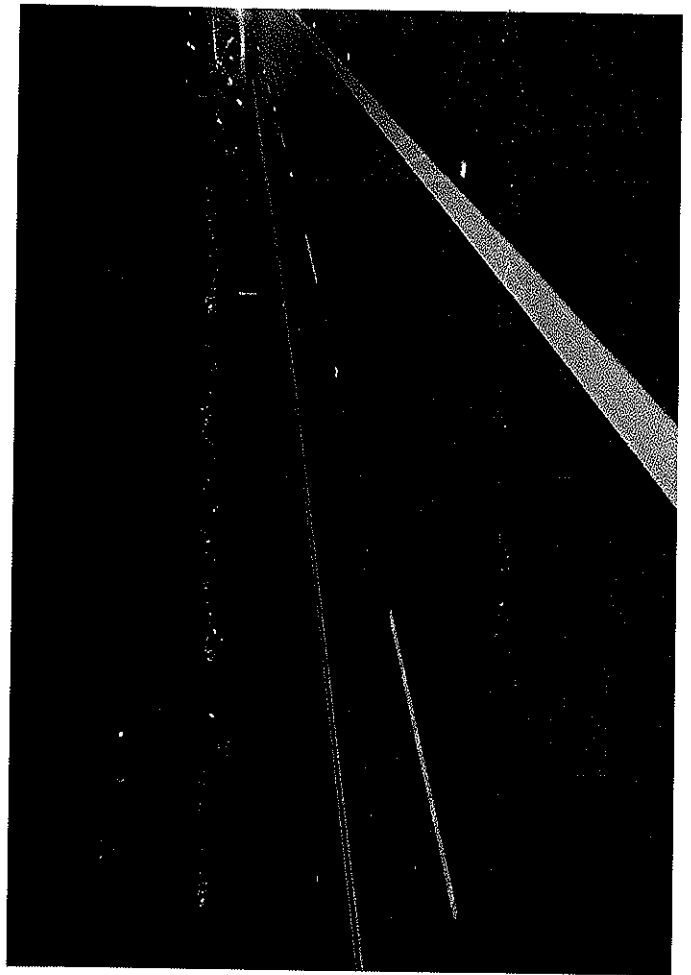
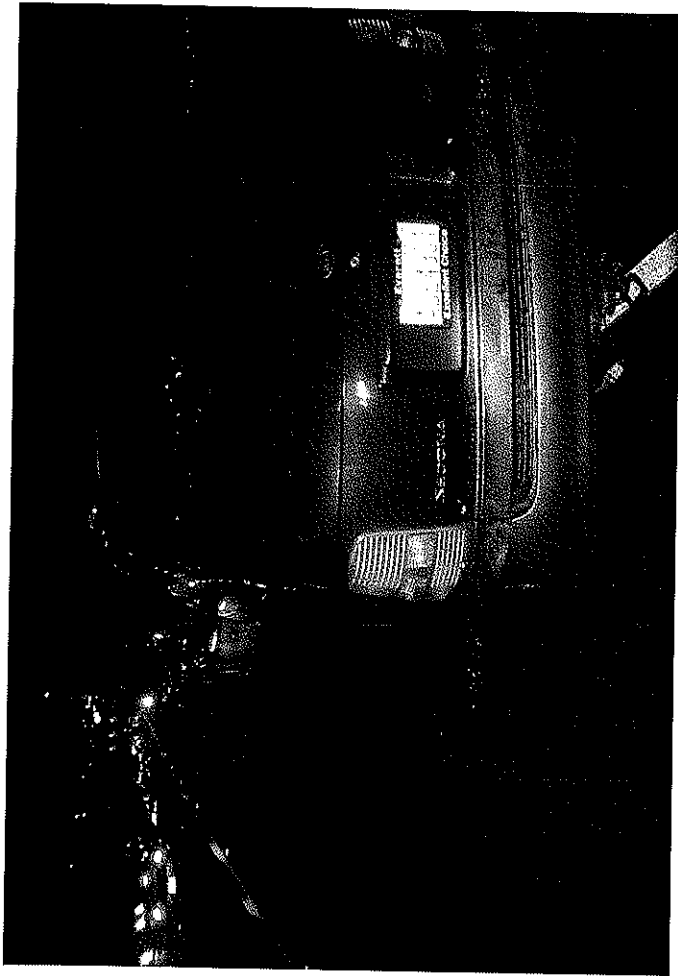
DATE

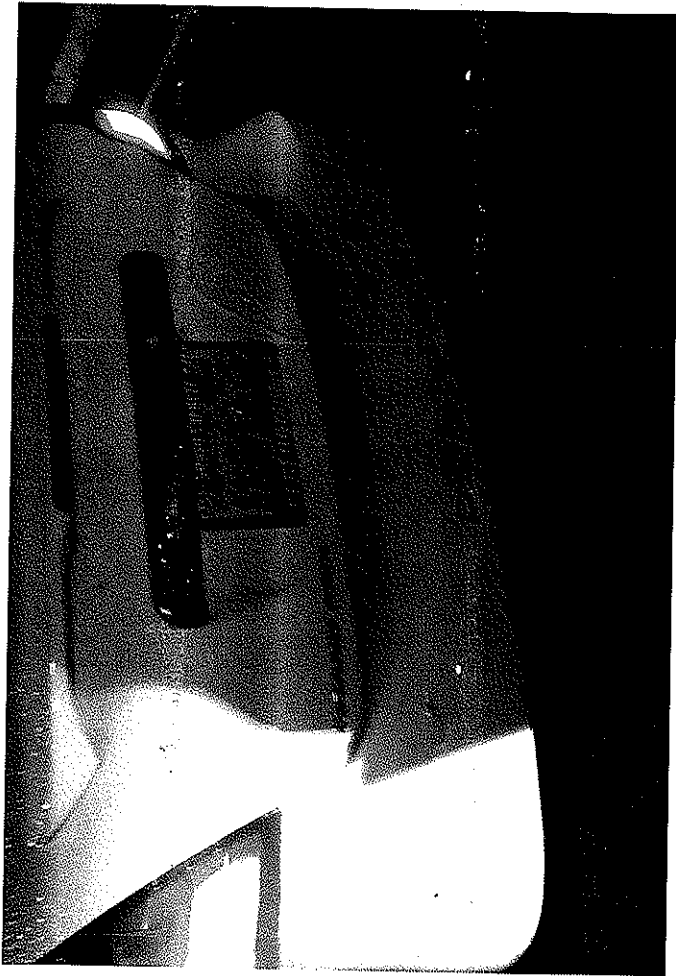
11/27/201

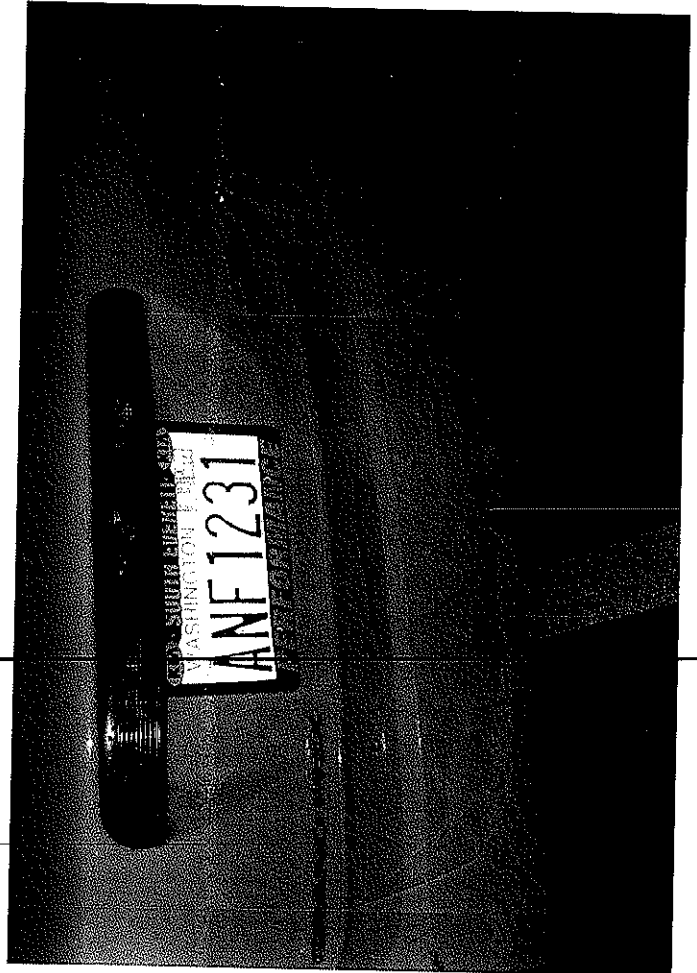
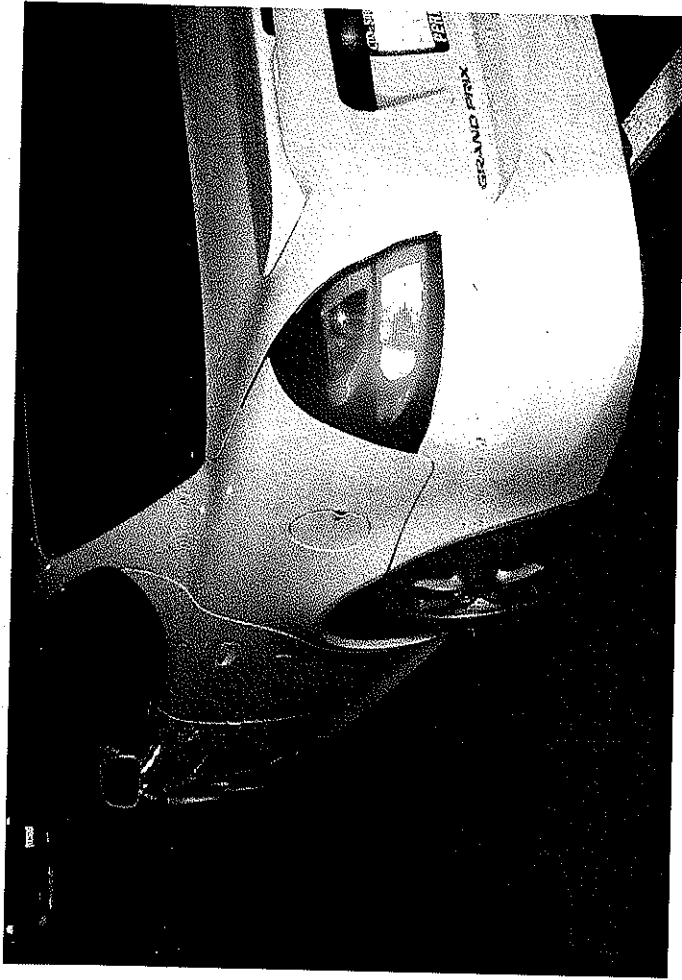
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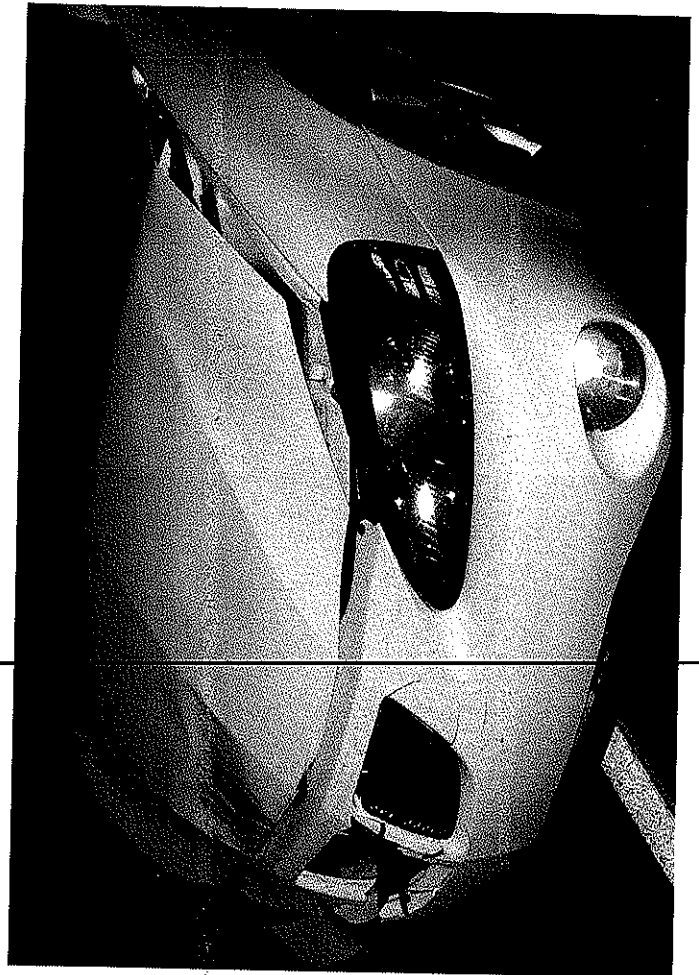
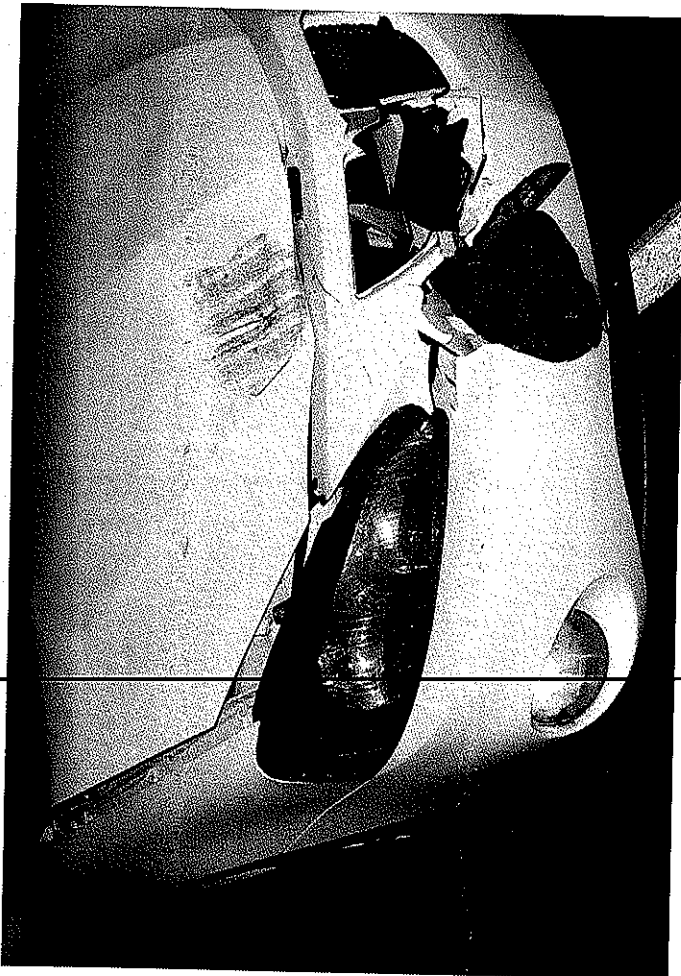
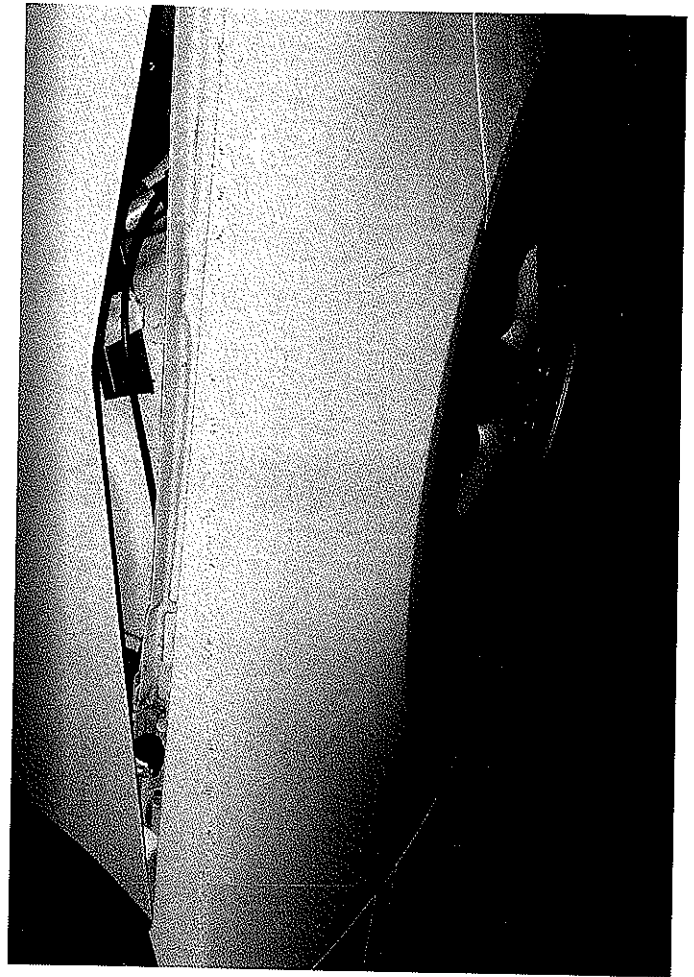
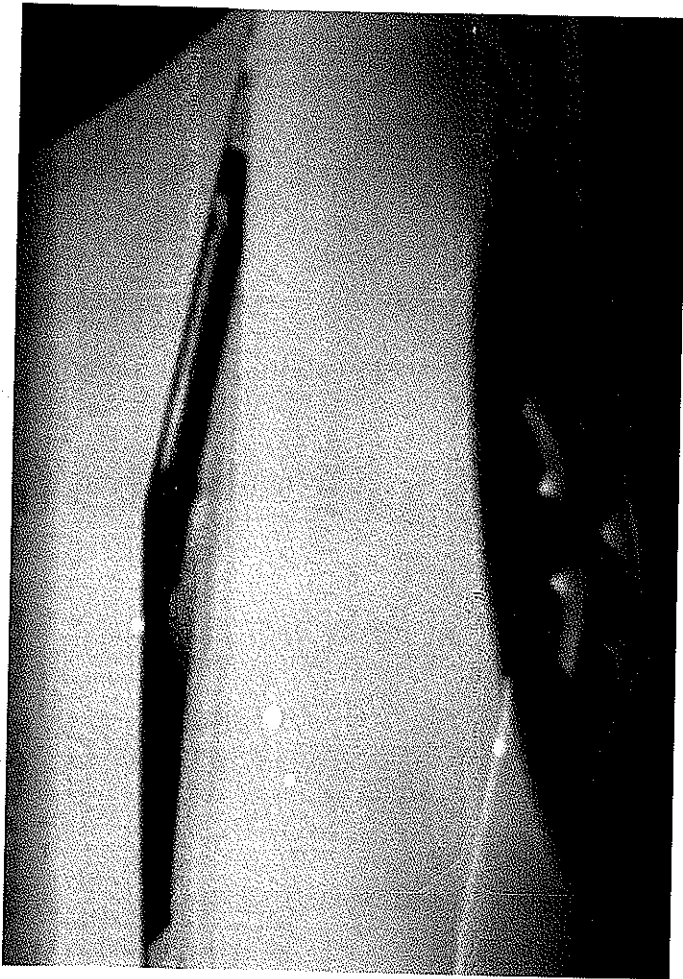
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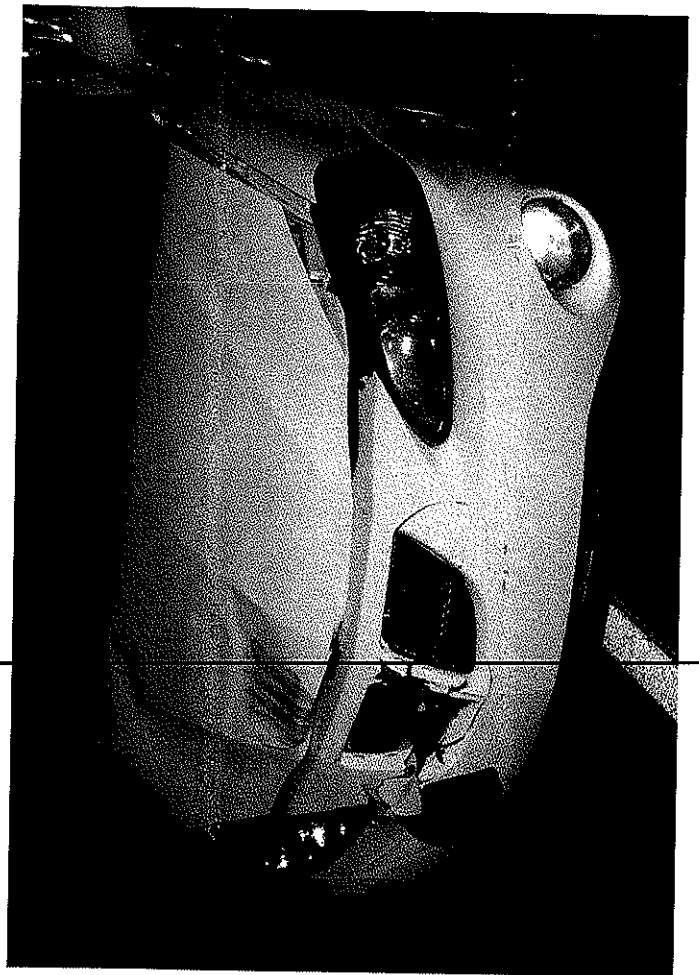
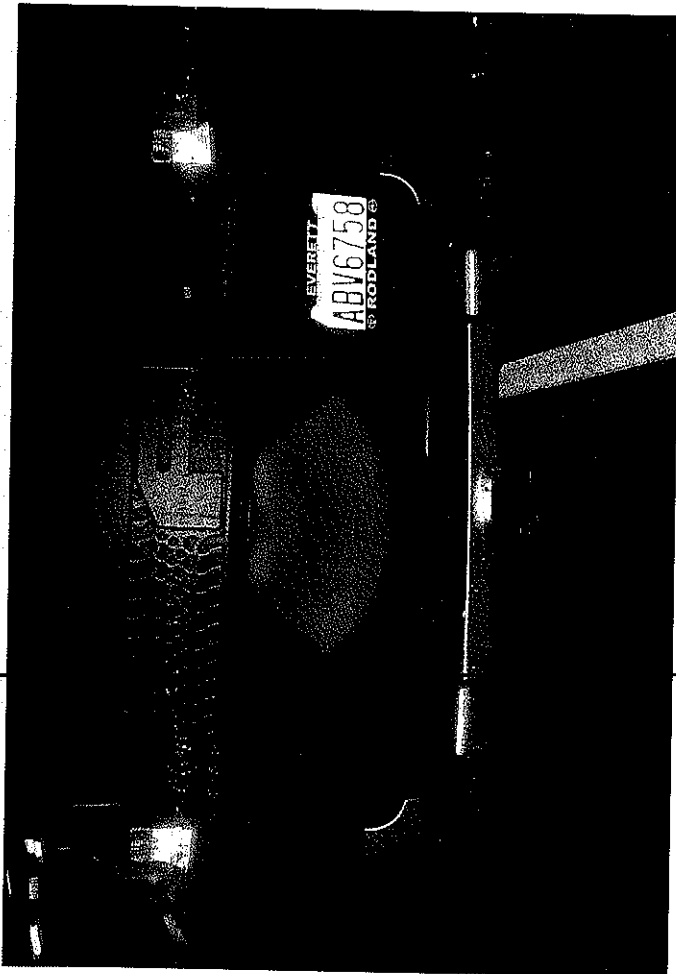


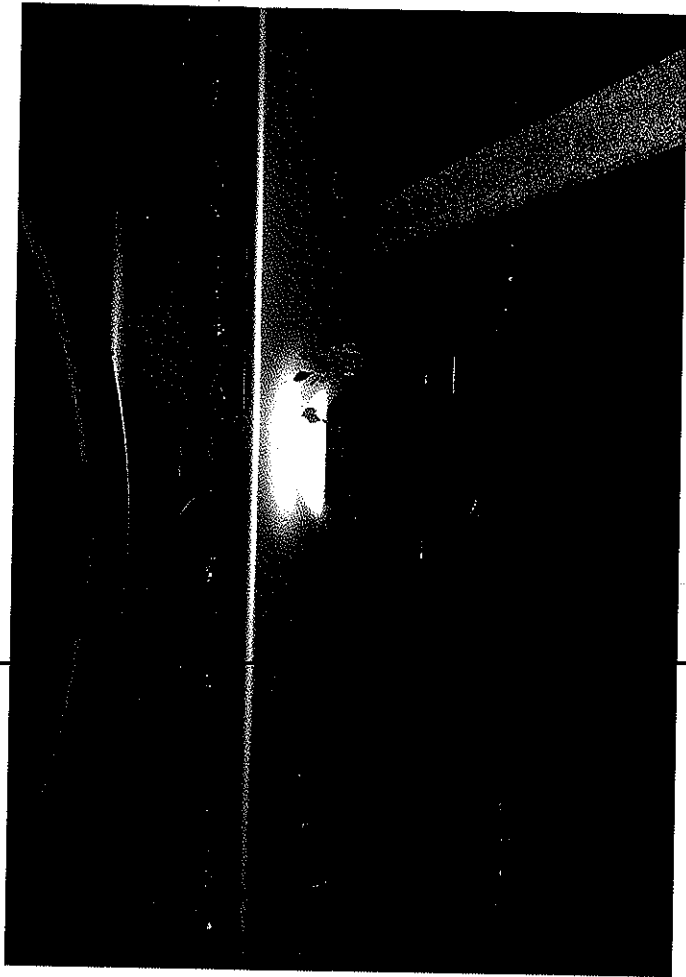












LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number <i>AMERMAN # 72</i>		Case Number <i>13-02995</i>	
Type of Crime: Felony / Misdemeanor (Circle)		Type of Case: <i>COLLISION</i>		Date/Time: <i>11-26-2012</i>	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evidence will be held until court disposition or when the Statute of Limitations has expired *Found and Safekeeping will be held for 60 days or 60 days past owner notification			
Item # <i>1</i>	Item <i>CD-R</i>	Brand Name <i>STAPLES</i>		Storage Location	Disposition
Action # <i>3</i>	Brand/Model/Caliber (Further Description)				
Serial #	Where Found <i>SR9 / LUMINEX</i>	Weight of Narcotic <i>LKS</i>			
Owner's Name		Address		City	State
				Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions <i>PICS</i>					Barcode goes here
Item #	Item	Brand Name		Storage Location	Disposition
Action #	Brand/Model/Caliber		(Further Description)		
Serial #	Where Found	Weight of Narcotic			
Owner's Name		Address		City	State
				Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions					Barcode goes here
Item #	Item	Brand Name		Storage Location	Disposition
Action #	Brand/Model/Caliber		(Further Description)		
Serial #	Where Found	Weight of Narcotic			
Owner's Name		Address		City	State
				Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions					Barcode goes here
Item #	Item	Brand Name		Storage Location	Disposition
Action #	Brand/Model/Caliber		(Further Description)		
Serial #	Where Found	Weight of Narcotic			
Owner's Name		Address		City	State
				Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions					Barcode goes here
Item #	Item	Brand Name		Storage Location	Disposition
Action #	Brand/Model/Caliber		(Further Description)		
Serial #	Where Found	Weight of Narcotic			
Owner's Name		Address		City	State
				Zip	Phone #
Owner Signature/Other remarks /additional information/ special instructions					Barcode goes here

Evidence Control Use Only:
 Received by Evidence: _____ NCIC/WACIC ☒ Date: _____ CAD/RMS Checked _____
 Name: _____ # _____ NCIC/WACIC + Date: _____ Owner Letter Sent: _____
 Date: _____ Time: _____ NCIC/WACIC - Date: _____ Owner Letter Sent: _____

ROUTING: _____
 White: Property Room
 Yellow: Case File

Incident History for: #SS13026001 Xref: #S013199774

Case Numbers: \$SS13002995

Entered 11/26/13 18:45:45 BY SPCT06 SP0370
Dispatched 11/26/13 18:46:11 BY SPDP17 SP0112
Enroute 11/26/13 18:46:11
Onscene 11/26/13 18:54:07
Closed 11/26/13 19:33:47

Initial Type: ACC Initial Alarm Level: Final Alarm Level:
Final Type: ACC (ACCIDENT, NON-INJURY OR UNKNOWN) Pri: 2 Dispo: H
Police BLK: SS001 Fire BLK: AG1618 Map Page: 377E-6 Group: SS1 Beat: NORT
Src: T
Loc: LUNDEEN PARK WY/SR 9 NE , LKS (V)

Loc Info: SOUTH OF LOC

Name: NOBEL, DERRICK Addr: Phone: 4255306789

/1845 (SP0370) ENTRY , CC, NOW, NON INJURY, BLOCKING, 3 CARS INVOLVED,
WHI PONTIAC VS SUBARU VS VAN
/1845 (SP0112) VIEWED
/1846 DISPER SS1940 #SS120 BERNHARD, OFFICER (KERRY)
/1846 \$PREMPT SS1940
/1846 \$DISPER SS1930 #SS72 AUKERMAN, OFFICER (WAYNE)
/1846 PREDSP SS1940 SS1930
/1851 (SP0200) CROSS #S013199774
/1854 (SP0112) ASSTOS SS1940 [LUNDEEN PARK WY/SR 9 NE , LKS]
#SS120 BERNHARD, OFFICER (KERRY)
/1856 (*****) REMINQ SS1940 ABV6758
/1856 (SP0112) REMINQ SS1940 LIC, 1940, ABV6758, , ,
/1856 (*****) REMINQ SS1940 ANF1231
/1856 (SP0112) REMINQ SS1940 LIC, 1940, ANF1231, , ,
/1856 (*****) REMINQ SS1940 ADE4931
/1856 (SP0112) REMINQ SS1940 LIC, 1940, ADE4931, , ,
/1858 (SS72) *ONSCNE SS1930
/1901 (SP0112) ROTREQ SS1930 TOW 5099 LKS MACK'S TOWING
3605683131 , OWNERS REQ
/1904 (SS120) *ASNCAS SS1940 \$SS13002995
/1933 (SP0112) CLEAR SS1940 D/H
/1933 CLEAR SS1930 D/H
/1933 CLOSE SS1930